

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000025774

FILED  
Jan 19, 2006  
Secretary of State

Entity Name: UNIQUE PAINTING & DRYWALL ENTERPRISE INC.

## Current Principal Place of Business:

11386 TANAGER DRIVE, SOUTH  
JACKSONVILLE, FL 32225

## New Principal Place of Business:

3167 ST. JOHNS BLUFF RD. SO.  
SUITE 109  
JACKSONVILLE, FL 32246

## Current Mailing Address:

11386 TANAGER DRIVE, SOUTH  
JACKSONVILLE, FL 32225

## New Mailing Address:

3167 ST. JOHNS BLUFF RD. SO.  
SUITE 109  
JACKSONVILLE, FL 32246

FEI Number: 32-0106782

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

PRESSLEY, VALERIE D  
11386 TANAGER DRIVE SOUTH  
JACKSONVILLE, FL 32225 US

## Name and Address of New Registered Agent:

PRESSLEY, VALERIE D  
3167 ST. JOHNS BLUFF RD. SO.  
SUITE 110  
JACKSONVILLE, FL 32246 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

01/19/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: CEO ( ) Delete  
Name: PRESSLEY, REGINALD CEO  
Address: 8201 KONA AVENUE, APT. 138  
City-St-Zip: JACKSONVILLE, FL 32211

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: TR ( ) Change (X) Addition  
Name: SUSAN, GRAHAM C TR  
Address: 9063 8TH AVE  
City-St-Zip: JACKSONVILLE, FL 32208

Title: N/A ( ) Change (X) Addition  
Name: N/A, N/A  
Address: SAME SAME  
City-St-Zip: JACKSONVILLE, FL 32225

Title: N/A ( ) Change (X) Addition  
Name: N/A, N/A  
Address: SAME SAME  
City-St-Zip: JACKSONVILLE, FL 32225

Title: N/A ( ) Change (X) Addition  
Name: N/A, N/A  
Address: SAME SAME  
City-St-Zip: JACKSONVILLE, FL 32225

Title: N/A ( ) Change (X) Addition  
Name: N/A, N/A  
Address: SAME SAME  
City-St-Zip: JACKSONVILLE, FL 32225

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SUSAN C. GRAHAM

TR

01/19/2006

Electronic Signature of Signing Officer or Director

Date